This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:	Alecyons

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	x	Fee	Fee	_	Ttal
	Sm./Lg.	<i>н</i> Сідішэ	<u> </u>		Sm. Entity	Lg. Entity		7.0
Basic Filing Fee	201/101				345	(<u>-90)</u>		34
Total Claims >20	203/103	-20 =		x		15	=	
Independent Claims >3	202/102	-3=		x	21	16.	2	39_
Mult. Dep Claim Present	204/104				130	26C	æ	
Surcharge	205/105				65	<u> 130 </u>	#	105
English Translation	139							
TOTAL FEE CALCULA	·					•		449
Fees due upon filing t	ne application:							
Total Filing Fees Due	s = \$	440		_	•			
Less Filing Fees Subn	nitted - \$	Ø	· · · · · · · · · · · · · · · · · · ·					•
BALANCE DUE	= \$	44	G					
Mah.					•			